

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	UT	69007	11/15/99
O.I.P.E. CLASSIFIER		25	11/22/99
FORMALITY REVIEW	OKS	7170	12-14

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 - (Through numeral) Canceled
 + Restricted

N Non-elected
 I Interference
 A Appeal
 O Objected

Claim	Final	Original	Date
1	✓	5/1/02	5/1/02
2	✓	✓	10/29/99
3	✓	✓	10/29/99
4	✓	✓	10/29/99
5	✓	✓	10/29/99
6	✓	✓	10/29/99
7	✓	✓	10/29/99
8	✓	✓	10/29/99
9	✓	✓	10/29/99
10	✓	✓	10/29/99
11	✓	✓	10/29/99
12	✓	✓	10/29/99
13	✓	✓	10/29/99
14	✓	✓	10/29/99
15	✓	✓	10/29/99
16	✓	✓	10/29/99
17	✓	✓	10/29/99
18	✓	✓	10/29/99
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Claim	Final	Original	Date
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If more than 150 claims or 10 actions
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